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PTO/SB/01 (12-97)

Approved for use through 9/30/00.OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	24631.706
	First Named Inventor	Hovav Shacham
	COMPLETE IF KNOWN	
	Application Number	Not Yet Assigned
	Filing Date	Herewith
	Group Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND APPARATUS FOR BATCHED NETWORK SECURITY PROTECTION SERVER PERFORMANCE**

(Title of the Invention)

the specification of which  
☒ is attached hereto  
OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.
60/211,023	06/12/2000	
60/211,031	06/12/2000	

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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PTO/SB/02A (3-97)

Approved for use through 9/30/98, OMB 0651-0032

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> <b>Page <u>1</u> of <u>1</u></b>
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<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
<b>Given Name (first and middle (if any))</b>				<b>Family Name or Surname</b>			
Dan				Boneh			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>Residence: City</b>	Palo Alto	<b>State</b>	CA	<b>Country</b>	USA	<b>Citizenship</b>	Israeli
<b>Post Office Address</b>	3349 Louis Road						
<b>Post Office Address</b>							
<b>City</b>	Palo Alto		CA	<b>ZIP</b>	94303	<b>Country</b>	USA
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
<b>Given Name (first and middle (if any))</b>				<b>Family Name or Surname</b>			
Sanjay				Beri			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>City</b>	Palo Alto	<b>State</b>	CA	<b>Country</b>	USA	<b>Citizenship</b>	Canadian
<b>Post Office Address</b>	562 Kendall Ave, Unit #4						
<b>Post Office Address</b>							
<b>City</b>	Palo Alto	<b>State</b>	CA	<b>ZIP</b>	94306	<b>Country</b>	USA
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
<b>Given Name (first and middle (if any))</b>				<b>Family Name or Surname</b>			
<b>Inventor's Signature</b>						<b>Date</b>	
<b>City</b>		<b>State</b>		<b>Country</b>		<b>Citizenship</b>	
<b>Post Office Address</b>							
<b>Post Office Address</b>							
<b>City</b>		<b>State</b>		<b>ZIP</b>		<b>Country</b>	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number

Parent Filing Date  
(MM/DD/YYYY)

Parent Patent Number  
(if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 021971 

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar  
Code Label here

Name

Registration  
Number

Name

Registration  
Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number  
or Bar Code Label

021971

OR ☐ Correspondence address below

Name Michael C. Martensen

Address Wilson Sonsini Goodrich & Rosati

Address 650 Page Mill Road

City Palo Alto State CA ZIP 94304

Country U.S. Telephone 650-493-9300 Fax 650-493-6811

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Hovav

Shacham

Inventor's Signature

Date

Residence: City Palo Alto State CA Country USA Citizenship USA

Post Office Address 3826 Mumford Place

Post Office Address

City Palo Alto State CA ZIP 94306 Country USA

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto: